



Massachusetts Department of Environmental Protection
Bureau of Resource Protection – Water Management Program

Golf Course Facility Water Withdrawal Survey 2003

Massachusetts Water Management Act, MGL c. 21G

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



A. Location Information

Name of Golf Course Facility

Street Address

City

State

Zip Code

Contact Person Name

Phone Number

B. Golf Course Facility

Type of course: ☐ private ☐ municipal ☐ other: _____

Number of holes: ☐ 9 ☐ 18 ☐ other (specify): _____

Practice facility: ☐ yes ☐ no Irrigated: ☐ yes ☐ no

Course yardage from championship tees: _____ yardage

Total property acreage: _____ acreage Total irrigated turf acreage: _____ acreage

Method of acreage determination:

☐ surveyed plan ☐ estimate ☐ other: _____

Amount of irrigated acreage for the following:

Fairways: _____ acreage Rough: _____ acreage

Tees: _____ acreage Greens: _____ acreage

Practice (driving range, etc.): _____ acreage Landscape and Ornamental: _____ acreage

Other (describe): _____

Do you have plans to expand irrigated acreage, upgrade or redesign irrigation supply and distribution systems through the year 2008?

☐ Yes ☐ No Explain: _____



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C. Water Use

1. What is the source of your water used for irrigation?

☐ Purchased from a municipal/private
water company

Name of supplier

☐ Purchased from other

Name of supplier

☐ Private well(s) or surface withdrawals owned and operated by the golf course

Number of your **own** irrigation sources: _____

Number of irrigation wells: _____

Number of surface withdrawals: _____

Number of lined storage ponds: _____

Volume of lined storage ponds: _____

Number of natural streams or ponds used for withdrawal: _____

2. What is the source of your potable water?

☐ Purchased from a municipal/private
water company

Name of supplier

☐ Purchased from other

Name of supplier

☐ Private well(s) or surface withdrawals owned and operated by the golf course

Number of your **own** potable sources: _____

PWS ID #

Number of groundwater/wells: _____

Number of surface withdrawals: _____

3. Check all potable needs that are being met:

☐ Residential Units:

Number of Residential Units

☐ Club house

☐ Banquet facilities

☐ Pool

☐ Conference

Provide average daily water use from OWN sources: _____

gallons per day



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D. Metered Water

1. For golf courses that meter withdrawal volumes from your OWN sources, provide information on your actual total (potable and irrigation) withdrawal volumes for the previous 3 years. Next to each entry, designate whether volume is from Actual (A) metered reading or Estimate (E) based on total withdrawn metered reading. Unusual episodic events should be noted with an asterisk (*).

Total Water Withdrawn in Millions of Gallons (mg) (2 decimals)

A = Actual E = Estimate * = Episodic

Month	2000	2001	2002
January	_____	_____	_____
February	_____	_____	_____
March	_____	_____	_____
April	_____	_____	_____
May	_____	_____	_____
June	_____	_____	_____
July	_____	_____	_____
August	_____	_____	_____
September	_____	_____	_____
October	_____	_____	_____
November	_____	_____	_____
December	_____	_____	_____

* Episodic Event (any significantly unusual excess or diminished water use) – Explain:

2. Are all your withdrawal points metered? ☐ Yes ☐ No

	Source 1	Source 2	Source 3	Source 4
When was meter installed?	_____	_____	_____	_____
How often is meter calibrated?	_____	_____	_____	_____
Date of last calibration	_____	_____	_____	_____
Not metered	_____	_____	_____	_____



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D. Metered Water (Continued)

3. How do you irrigate turf grass?

☐ Automatic sprinkler

☐ Other (specify): _____

4. What water conservation “best management practices” do you employ? (check all that apply and comment below)

☐ Metering all uses including irrigation and ancillary withdrawals from on-site sources

☐ Lining of existing and new irrigation ponds with impervious materials

☐ Installation of weather stations and automated sprinklers based on atmospheric conditions

☐ Sprinkler operation and maintenance including installation of low trajectory sprinkler systems

☐ Leak detection (pressure testing) and repair of leaks

☐ Turf Management Plan

☐ Water Conservation Plan

☐ Water Balance/Irrigation Analysis

☐ Water reuse, specify if wastewater or stormwater reuse

Other comments:

E. Certification

“I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete.”

Print Name

Title

Signature

Date

Mailing Address

City/Town

Zip Code

Phone Number including Area Code